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## APPLICANTS

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\*\* CONTINUING DATA ..... *LM*  
 This appln claims benefit of 60/410,901 09/16/2002

\*\* FOREIGN APPLICATIONS ..... *LM* *10/16/02*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 12/16/2003

\*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY NY	SHEETS DRAWING 3	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 2
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## TITLE

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